

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Serial Number  
**101070973**

**CLAIMS AS FILED - PART I**

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20 =   | *            |
| INDEPENDENT CLAIMS  | minus 3 =    | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**8-9-04 CLAIMS AS AMENDED - PART II**

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * 11                             | Minus ** 20                        | =             |
| Independent   | * 2                              | Minus *** 3                        | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| SMALL ENTITY TYPE <input type="checkbox"/> |        | OR | OTHER THAN SMALL ENTITY |        |
|--|--------|----|-------------------------|--------|
| RATE                                       | FEE    |    | RATE                    | FEE    |
| BASIC FEE                                  | 385.00 | OR | BASIC FEE               | 770.00 |
| X\$ 9=                                     |        | OR | X\$18=                  |        |
| X43=                                       |        | OR | X86=                    |        |
| +145=                                      |        | OR | +290=                   |        |
| TOTAL                                      |        | OR | TOTAL                   |        |

| SMALL ENTITY TYPE <input type="checkbox"/> |                | OR | OTHER THAN SMALL ENTITY |                |
|--|----------------|----|-------------------------|----------------|
| RATE                                       | ADDITIONAL FEE |    | RATE                    | ADDITIONAL FEE |
| X\$ 9=                                     |                | OR | X\$18=                  |                |
| X43=                                       |                | OR | X86=                    |                |
| +145=                                      |                | OR | +290=                   |                |
| TOTAL ADDIT. FEE                           |                | OR | TOTAL ADDIT. FEE        |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus **                           | =             |
| Independent   | *                                | Minus ***                          | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| SMALL ENTITY TYPE <input type="checkbox"/> |                | OR | OTHER THAN SMALL ENTITY |                |
|--|----------------|----|-------------------------|----------------|
| RATE                                       | ADDITIONAL FEE |    | RATE                    | ADDITIONAL FEE |
| X\$ 9=                                     |                | OR | X\$18=                  |                |
| X43=                                       |                | OR | X86=                    |                |
| +145=                                      |                | OR | +290=                   |                |
| TOTAL ADDIT. FEE                           |                | OR | TOTAL ADDIT. FEE        |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus **                           | =             |
| Independent   | *                                | Minus ***                          | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| SMALL ENTITY TYPE <input type="checkbox"/> |                | OR | OTHER THAN SMALL ENTITY |                |
|--|----------------|----|-------------------------|----------------|
| RATE                                       | ADDITIONAL FEE |    | RATE                    | ADDITIONAL FEE |
| X\$ 9=                                     |                | OR | X\$18=                  |                |
| X43=                                       |                | OR | X86=                    |                |
| +145=                                      |                | OR | +290=                   |                |
| TOTAL ADDIT. FEE                           |                | OR | TOTAL ADDIT. FEE        |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.